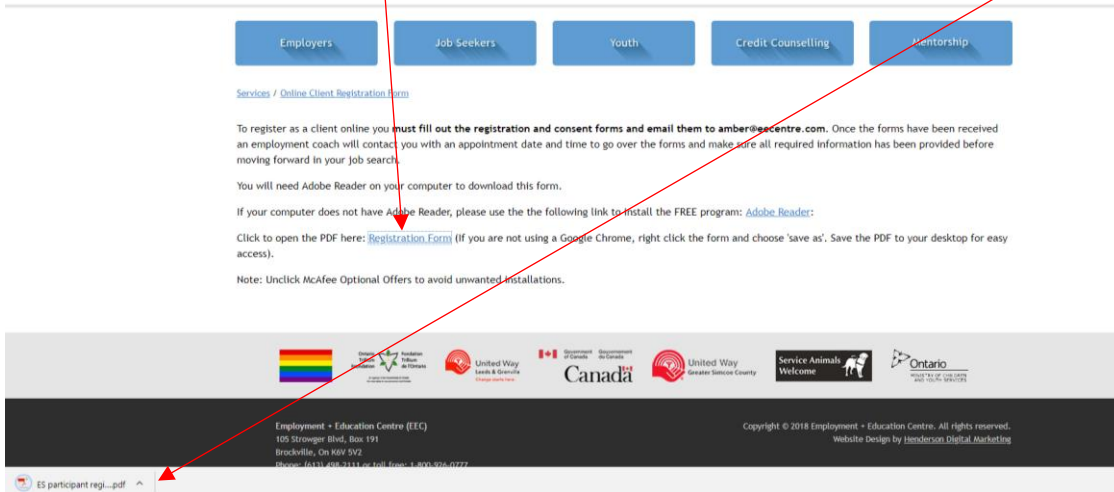


# PLEASE READ THROUGH THE ENTIRE GUIDE BEFORE ATTEMPTING TO FILL OUT THE REGISTRRTION FORM

(You may need to click enable editing at the top of this window to see this document in full)

To fill in the Registration Form:

1. Click the Registration Form link on the page and open the PDF that saves on the bottom of screen :



2. Fill in AS MUCH AS YOU CAN of the form. If something does not make sense to you, leave it blank:

A screenshot of the 'Employment Ontario Participant Registration' form, which is a PDF document opened in Adobe Acrobat Reader. The form is titled 'Print Blank Form' and includes various sections for personal and contact information. The sections include: 'Employment Ontario Programs' (with checkboxes for Employment Service, Literacy and Basic Skills, and Youth-Job Link), 'Service Provider Use Only' (with fields for Case Reference, Person Reference, and Date of Registration), 'Participant Details' (with fields for Last Name, First Name, Middle Initial, Preferred Name, Social Insurance Number, Gender, Date of Birth, and Place of Birth), 'Status in Canada' (with checkboxes for Canadian Citizen, Permanent Resident, and other), 'Preferred Communication' (with checkboxes for Phone, Email, Hard Copy, and Mail), 'Participant Address and Contact Information' (with fields for Primary and Alternate Mailing Addresses, including Unit Number, Street Name, City/Town, Province, and Postal Code), and 'Telephone Number' (with fields for Primary and Alternate Phone Numbers, including Home, Mobile, and Other). The form is marked with an asterisk (\*) for mandatory fields. The footer of the form includes the date '2006 (2/16/05)', the copyright notice '© Queen's Printer for Ontario, 2014', and the page number 'Page 1 of 4'.

3. Save the filled in form to your computer (IF YOU ARE USING A PUBLIC COMPUTER REMEMBER TO DELETE THE FORM ONCE YOU HAVE EMAILED IT TO [AMBER@EECENTRE.COM](mailto:AMBER@EECENTRE.COM)) - The **Desktop** is the easiest location to save to
4. Email this form and the Authorization form **TOGETHER IN ONE EMAIL WITH YOUR NAME AND PHONE NUMBER to [amber@eecentre.com](mailto:amber@eecentre.com)**